Substitute Form PTO/SB/30 (5-03)

CIPE		<u> </u>		
Request For Continued Examination (RCE) Transmittal	Application Number	09/910,639		
	Filing Date	July 20, 2001 Daniel A. Vallera et al. 1616		
	First Named Inventor			
Transmittal	Group Art Unit			
Mail Stop RCE Commissioner for Patents	Examiner Name	Dameron Levest Jones		
P.O. Box 1450	Attorney Docket Number	09531-023001		

This is a Request for Continued Examination (RCE) under 37 C.F.R. §1.114 of the above-identified application.

Request for Continued Examination (RCE) practice under 37 CFR 1.114 does not apply to any utility or plant application filed prior to June 8, 1995, or to any design application. See Instruction Sheet for RCEs (not to be submitted to the USPTO) on page 2.

a	amendi	ssion required under 37 C.F.R. §1.114 Note: If ments enclosed with the RCE will be entered in the orn to does not wish to have any previously filed unenterement(s)	der in which	they wer	e filed unless app	olicant instructs otherwise. If			
	a. Previously submitted. If a final Office action is outstanding, any amendment filed after the final Office action may be considered as a submission even if this box is not checked.								
>	i. Consider the arguments in the Appeal Brief or Reply Brief previously filed on								
	ii.	Other							
b.	□ Eı	nclosed							
	i.	☐ Amendment/Reply	iii.		Information Dis	sclosure Statement (IDS)			
	ii.	☐ Affidavit(s)/Declaration(s)	iv.		Other				
2.	2. Miscellaneous								
a. Suspension of action on the above-identified application is requested under 37 C.F.R. §1.103(c) for a period of months. (Period of suspension shall not exceed 3 months; Fee under 37 C.F.R. §1.17(i) required)									
b. Other									
3. Fee The RCE fee under 37 C.F.R. §1.17(e) is required by 37 C.F.R. §1.114 when the RCE is filed.									
a. ☑ The Director is hereby authorized to charge the following fees, or credit any overpayments, to Deposit Account No. <u>06-1050</u>									
i. RCE fee required under 37 CFR 1.17(e)									
ii.									
iii. 🛛 Other Any deficiencies									
b. 🖸 Check in the amount of \$ <u>385</u> enclosed									
c. Payment by credit card (Form PTO-2038 enclosed)									
		SIGNATURE OF APPLICANT, A	TTORNEY	OR AGEN	IT REQUIRED				
Name	(Print/	Type) Stuart Macphail, Ph.D., J.D	Registrat	tion No. (A	ttorney/Agent)	44,217			
Signati	ure	Stuff llafter	Date	May 17, 2	004				
CERTIFICATE OF MAILING OR TRANSMISSION									
I hereby certify that this correspondence is being deposited with the United States Postal Service as first class mail in an envelope addressed to Mail Stop RCE, Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450 or facsimile transmitted to the U.S. Patent and Trademark Office on the date shown below.									
Name	(Print/								
Signati	ure	Mayonn () los	Date	May 17, 2	004				